patent attorneys



November 13, 2003

I hereby certify that this correspondence is being deposited with the United States Postal Service "Express Mail to Addressee" service under 37 C.F.R. 1.10 on the date indicated above and is addressed to the

Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

RICHARD E. JENKINS

November 13, 2003

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> LICENSED ONLY IN CA "LICENSED ONLY IN KY

Commissioner for Patents P.O. Box 1450

Alexandria, VA 22313-1450

Re:

U.S. Patent Application Serial No. 09/905,679 for **ENDOSCOPIC CLIP APPLIER AND METHOD** 

"Express Mail" mailing number

Date of Deposit

Our Ref. No. 1439/12

Sir:

Please find enclosed in connection with the subject U.S. patent application the following documents:

- An Amendment Transmittal Form; 1.
- 2. An Amendment A:
- A marked up version of Substitute Specification; 3.
- A clean version of Substitute Specification;
- 5. Replacement Sheets of drawings;
- A return-receipt postcard to be returned to us with the U.S. Patent and 6. Trademark Office filing stamp thereon; and
- A Certificate of Express Mail No.: EV 412492966 US. 7.

tel 919.493.8000 | Jenkins, Wilson & Taylor, P.A. fax 919.419.0383 | JenkinsWilsonTaylor.com

University Tower, Suite 1400 | 3100 Tower Boulevard | Durham, North Carolina 27707

Commissioner for Patents November 13, 2003 Page 2

The Commissioner is hereby authorized to charge any fees associated with the filing of this correspondence to Deposit Account Number **50-0426**.

Respectfully submitted,

JENKINS, WILSON & TAYLOR, P.A.

Richard E. Jenkins

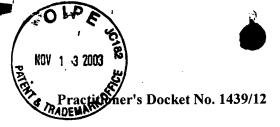
Registration No. 28,428

1439/12

REJ/DPG/bss

**Enclosures** 

Customer No: 25297



# IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Wilson, Jr. et al.

Application No.: 09/905,679

Group No.: 3731

Filed: 07/13/2001

Examiner: Roberts, Paul A

For: ENDOSCOPIC CLIP APPLIER AND METHOD

**Commissioner for Patents** P.O. Box 1450 Alexandria, VA 22313-1450 ТЕСНИОГОСУ СЕИТЕЯ ВЗ700

YUUC 1 C NON

AMENDMENT TRANSMITTAL

BECEINED

Transmitted herewith is an amendment for this application. 1.

# **STATUS**

2. Applicant is other than a small entity.

# **EXTENSION OF TERM**

3. The proceedings herein are for a patent application and the provisions of 37 C.F.R. 1.136 apply. Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

# CERTIFICATION UNDER 37 C.F.R. §§ 1.8(a) and 1.10\*

(When using Express Mail, the Express Mail label number is mandatory; Express Mail certification is optional.)

I hereby certify that, on the date shown below, this correspondence is being:

#### MAILING

deposited with the United States Postal Service in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

37 C.F.R. § 1.8(a) ☐ with sufficient postage as first class mail. 37 C.F.R. § 1.10\*

■ as "Express Mail Post Office to Addressee"

Mailing Label No. EV 412492966 US (mandatory)

### TRANSMISSION

☐ facsimile transmitted to the Patent and Trademark Office, (703)

Date: November 13, 2003

Bonnie S. Sheridan

(type or print name of person certifying)

S. Sheridan

<sup>\*</sup> Only the date of filing (§ 1.6) will be the date used in a patent term adjustment calculation, although the date on any certificate of mailing or transmission under § 1.8 continues to be taken into account in determining timeliness. See § 1.703(f). Consider "Express Mail Post Office to Addressee" (§ 1.10) or facsimile transmission (§ 1.6(d)) for the reply to be accorded the earliest possible filing date for patent term adjustment calculations.

# **FEE FOR CLAIMS**

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

	(Col. 1)	(Col. 2) (Col. 3)				(	OTHER THAN A SMALL ENTITY				
	CLAIMS										
	REMAINING	HIGHI	EST NO.								
	AFTER	PREVIOUSLY		PRESENT						AD	DIT.
	AMENDMENT	PAID FOR		EXTRA		RATE		FEE			
TOTAL	83	_	24	=	59	х	\$_	18.00	=	\$	1,062.00
INDEP.	13		3	=	10	х	\$	86.00	=	\$	860.00
FIRST PRESENTATION OF MULTIPLE DEP. CLAIM						+	\$	0.00	_=	\$	0.00
								TOTAL			
							ΑI	DDIT. FEE		\$	1,922.00

Total additional fee for claims required \$1,922.00

# **FEE PAYMENT**

5. Authorization is hereby made to charge the amount of \$1,922.00 to Deposit Account No. 50-0426.

Charge any additional fees required by this paper or credit any overpayment in the manner authorized above.

A duplicate of this paper is attached.

Date: November 13, 2003

Reg. No.: 28,428

Tel. No.: 919-493-8000 Customer No.: 25297 Signature of Practitioner

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